The assessment of previous risk factors and major comorbidities in people with type 2 diabetes

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Objective: to assess the presence of previous (before T2DM diagnostic) risk factors and major comorbidities in people with T2DM in a cross sectional study

Method: T2DM patients (DM duration > 4 years) were assessed between Jan 2014 - end Jun 2015 in a cross sectional study (retrospective data collected). Were evaluated previous cv risk factors and comorbidities: obesity, smoking, systemic hypertension, ischaemic heart disease, chronic thyroid diseases, dyslipidemia, hyperuricemia.

Results: 180 T2DM patients, age >40 years, 49.1% male, mean age 62.4 yrs, mean duration of T2DM 8.2 (3.9) yrs, mean HbA1c 8.5%. 62 patients had a HbA1c >9.5%. The patients were treated with: ACEi (51.8%), AT1RA (43.4%), new generation of CCB (35.6%), diuretics (HCTZ, indapamide) 62.8% and beta-blockers (18% nebivolol, 21.3% carvedilol, 19.5% metoprololol). 65.3% of the patients were obese, 19.1% smokers, 76.3% had SH and 75.7% dyslipidemia. IHD was present in 29%, chronic thyroid diseases in 9% and hyperuricemia in 26%. Microalbuminuria was determinate in 55.6% of the patients and macroalbuminuria in 49.6%. From these 22.6% had micro- and 5.7% macro-albuminuria.

Conclusion: The presence of previous risk factors and major comorbidities affects the evolution of type 2 DM. In these subjects the control of the illness is more difficult (mean HbA1c 8.5%) and the microvascular complications seems to appear earlier in most of the patients (microalbuminuria in 22.6% patients and proteinuria in 5.7%).